

HHS Privacy Impact Assessment (PIA) Summary

AHRQ: AHRQ CERTS

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	AHRQ CERTS
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Jun 27, 2006
5 OPDIV Name:	AHRQ
6 Unique Project Identifier (UPI) Number:	N/A
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	www.certs.hhs.gov
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Carmen Kelly
12 Provide an overview of the system:	This is not a collection system . The site provides information on the Centers for Education and Research on Therapeutics. CERTs. Congress authorized the CERTs demonstration program as part of the Food and Drug Administration Modernization Act of 199
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	N/A
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	No
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	Tim Erny
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

AHRQ: AHRQ CHIRI Extranet

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	AHRQ CHIRI Extranet
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Jun 21, 2006
5 OPDIV Name:	AHRQ
6 Unique Project Identifier (UPI) Number:	NA
7 Privacy Act System of Records (SOR) Number:	NA
8 OMB Information Collection Approval Number:	NA
9 Other Identifying Number(s):	NA
10 System Name:	CHIRI Extranet
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Tim Erny
12 Provide an overview of the system:	This is an Extranet site designed to promote coordination and collaboration among grantees of the Child Health Insurance Research Initiative (CHIRI), and their project officers from AHRQ, the David and Lucile Packard Foundation, and HRSA.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	CHIRI participants and project officers, AHRQ OPART-IT (which maintains the system), and CHIRI support contractors who substantively maintain the Extranet and disseminate CHIRI projects.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Contact information (name, address, phone, fax, and email) were obtained for Principal Investigators from their grant applications. They supplied information for other members of their research team. So that participants in CHIRI. could send things to
18 Describe the consent process:	No additional data collection is being conducted. Extranet users supply updates to the contract information. At the inception of the site, which was established at the request of the grantees to facilitate collaboration, users were told that the site woul
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	All Extranet users have their own user login name and password. AHRQ OPART-IT maintains security for the site.
24 Sr Official of Privacy Signature:	Tim Erny
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

AHRQ: AHRQ HCUPnet

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	AHRQ HCUPnet
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Jun 5, 2006
5 OPDIV Name:	AHRQ
6 Unique Project Identifier (UPI) Number:	N/A
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	http://hcup.ahrq.gov/
10 System Name:	HCUPnet Web site
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Anne Elixhauser
12 Provide an overview of the system:	The Healthcare Cost and Utilization Project (HCUP) is a family of health care databases and related software tools and products developed by the Agency for Healthcare Research and Quality (AHRQ) within the Department of Health and Human Services, with the Existing
13 Indicate if the system is new or an existing one being modified:	No
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, share, or disclose IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	HCUPnet does not collect or contain any personally identifiable information within any databases, records, or files hosted by the system.
18 Describe the consent process:	This system does not collect, share, or disclose IIF.
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	No
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	Tim Erny
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

AHRQ: AHRQ Medical Expenditure Panel Survey (MEPS)

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	AHRQ Medical Expenditure Panel Survey (MEPS)
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 24, 2006
5 OPDIV Name:	AHRQ
6 Unique Project Identifier (UPI) Number:	009-33-01-04-01-0011-00; (009-33-01-04-01-0011-00-110-218; 009-33-01-04-01-0011-00-202-070)
7 Privacy Act System of Records (SOR) Number:	09-35-0002
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Medical Expenditure Panel Survey (MEPS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Eric Colombel
12 Provide an overview of the system:	Data collection and dissemination
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	The agency does not share the IIF. Only non-IIF information is shared.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The information collected is: the age, race, and sex of each family member; Health conditions; Current Health Status; Visits to health care providers (doctors, dentists, hospitals, etc.); Charges and Payments for Health Care; Medications; Employment; Heal
18 Describe the consent process:	The information is gathered through a face-to-face interview process with the selected participants. Prior to the interview prosses it is explained to the participants what data is being collected, why, and how the data is shared and protected.
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	The IIF information is secured on a protected network that only accessible from specific terminals. This network has no access to the Internet or any other network.
24 Sr Official of Privacy Signature:	Tim Erny
25 Sr Official of Privacy Signoff Date:	May 25, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

AHRQ: AHRQ National Guidelines Clearinghouse (NGC)

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	AHRQ National Guidelines Clearinghouse (NGC)
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 25, 2006
5 OPDIV Name:	AHRQ
6 Unique Project Identifier (UPI) Number:	NA
7 Privacy Act System of Records (SOR) Number:	NA
8 OMB Information Collection Approval Number:	NA
9 Other Identifying Number(s):	NA
10 System Name:	AHRQ National Guidelines Clearinghouse (NGC)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Mary P. Nix, MS, MT(ASCP) SBB
12 Provide an overview of the system:	AHRQ National Guidelines Clearinghouse (NGC) is a public resource for evidence-based clinical practical guidelines. NGC is an initiative of the Agency for Healthcare Research and Quality (AHRQ). The NGC Website is a public website hosted by the contract Existing
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	NA
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	NA
18 Describe the consent process:	NA
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	No
23 Describe the IIF security controls:	NA
24 Sr Official of Privacy Signature:	Tim Erny
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

AHRQ: AHRQ National Quality Measures Clearinghouse (NQMC)

1	
The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.	
2	Summary of PIA Required Questions

Question	Response
1 System:	AHRQ National Quality Measures Clearinghouse (NQMC)
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 25, 2006
5 OPDIV Name:	AHRQ
6 Unique Project Identifier (UPI) Number:	NA
7 Privacy Act System of Records (SOR) Number:	NA
8 OMB Information Collection Approval Number:	NA
9 Other Identifying Number(s):	NA
10 System Name:	AHRQ National Quality Measures Clearinghouse (NQMC)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Mary P. Nix
12 Provide an overview of the system:	AHRQ National Quality Measures Clearinghouse (NQMC) is a public repository for evidence-based quality measures and measure sets. The AHRQ National Quality Measures Clearinghouse (NQMC) Website is hosted at ECRI (Contractor). Existing
13 Indicate if the system is new or an existing one being modified:	
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	NA
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	NA
18 Describe the consent process:	NA
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	No
23 Describe the IIF security controls:	NA
24 Sr Official of Privacy Signature:	Tim Erny
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

AHRQ: AHRQ Quality Tools (QT)

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	AHRQ Quality Tools (QT)
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 25, 2006
5 OPDIV Name:	AHRQ
6 Unique Project Identifier (UPI) Number:	NA
7 Privacy Act System of Records (SOR) Number:	NA
8 OMB Information Collection Approval Number:	NA
9 Other Identifying Number(s):	NA
10 System Name:	AHRQ Quality Tools (QT)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Mary P. Nix, MS, MT(ASCP)SBB
12 Provide an overview of the system:	AHRQ Quality Tools (QT) is a clearinghouse for practical, ready-to-use tools for measuring and improving the quality of healthcare. The AHRQ Quality Tools (QT) Website is public and is hosted by ECRI (Contractor). Existing
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	NA
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	NA
18 Describe the consent process:	NA
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	No
23 Describe the IIF security controls:	NA
24 Sr Official of Privacy Signature:	Tim Erny
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

AHRQ: AHRQ SQI

1

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2

Summary of PIA Required Questions

Question	Response
1 System:	AHRQ SQI
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Jun 14, 2006
5 OPDIV Name:	AHRQ
6 Unique Project Identifier (UPI) Number:	N/A
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	AHRQ Support for Quality Indicators System and Website
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Mamatha Pancholi, MS
12 Provide an overview of the system:	Support for Quality Indicators, under AHRQ Contract 290-02-0007. Includes website as well as management of user support contacts and integration of user support needs with AHRQ Quality Indicator strategic planning. The Support for Quality Indicators Con Existing
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The user support system and website are maintained as a public service to provide support to individuals interested in use of the AHRQ Quality Indicators and information on healthcare research and quality from our Agency. No personal information is colle No processes are in place. The information is not to be shared now or in the future. For additional information please consult the privacy notice is http://www.ahrq.gov/news/privacy.htm .
18 Describe the consent process:	Yes
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	Information is both physically and electronically secured. The hardware supporting this Web site is located in a controlled environment with physical locks and restricted access as well as intrusion detection/alarm systems. The data resides within a fir Tim Erny
24 Sr Official of Privacy Signature:	Tim Erny
25 Sr Official of Privacy Signoff Date:	Jun 15, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

AHRQ: AHRQ WEB

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question

Response

- 1 System:

AHRQ WEB
- 2 Is this a new PIA?

No
- 3 If this is an existing PIA, please provide a reason for revision:

PIA Validation
- 4 Date of this Submission:

Jun 14, 2006
- 5 OPDIV Name:

AHRQ
- 6 Unique Project Identifier (UPI) Number:

N/A
- 7 Privacy Act System of Records (SOR) Number:

N/A
- 8 OMB Information Collection Approval Number:

OMB 0935-0106
- 9 Other Identifying Number(s):

N/A
- 10 System Name:

AHRQ Web Site
- 11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:

Gerri Michael Dyer
- 12 Provide an overview of the system:

Information dissemination and customer feedback/inquiries. AHRQ Web site is a communications system for information dissemination that provides a customer feedback: mechanism for inquiries and comments. AHRQ was reauthorized in the Healthcare Research and Existing
- 13 Indicate if the system is new or an existing one being modified:

Yes
- 14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?

No
- 15 Is the system subject to the Privacy Act?

No
- 16 If the system shares or discloses IIF please specify with whom and for what purpose(s):

With whom and for what purposes: Handled in a confidential manner within the Agency; referred to the appropriate staff to respond to message or to fulfill the stated purpose of the communication. Web site mailbox inquiries are handled in a confidential
- 17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:

Users are given the option of contacting the site operator for the limited purposes of providing feedback or obtaining additional information. They may provide name, address, phone number, e-mail address, and Web URLs for Agency response to comments and i
- 18 Describe the consent process:

A customer feedback mechanism is provided on the Web site for users and can be linked through the Contact Us button on the site. An Electronic Privacy Policy Notice is posted on the Web site home page and all directories/subdirectories of the site. Inform
- 19 Does the system host a website?

Yes
- 20 Does the website have any information or pages directed at children under the age of thirteen?

No
- 21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?

Yes
- 22 Are there technical controls present?

Yes
- 23 Describe the IIF security controls:

User inquiries are handled in a confidential manner and secured in an electronic archive that is behind the network fiirewall. Only the system administrators have access.
- 24 Sr Official of Privacy Signature:

Tim Erny
- 25 Sr Official of Privacy Signoff Date:

Jun 15, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

